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Heart Diagnostic Center Operating

The Montana Heart Diagnostic Center in Great Falls has now been in operation several months.

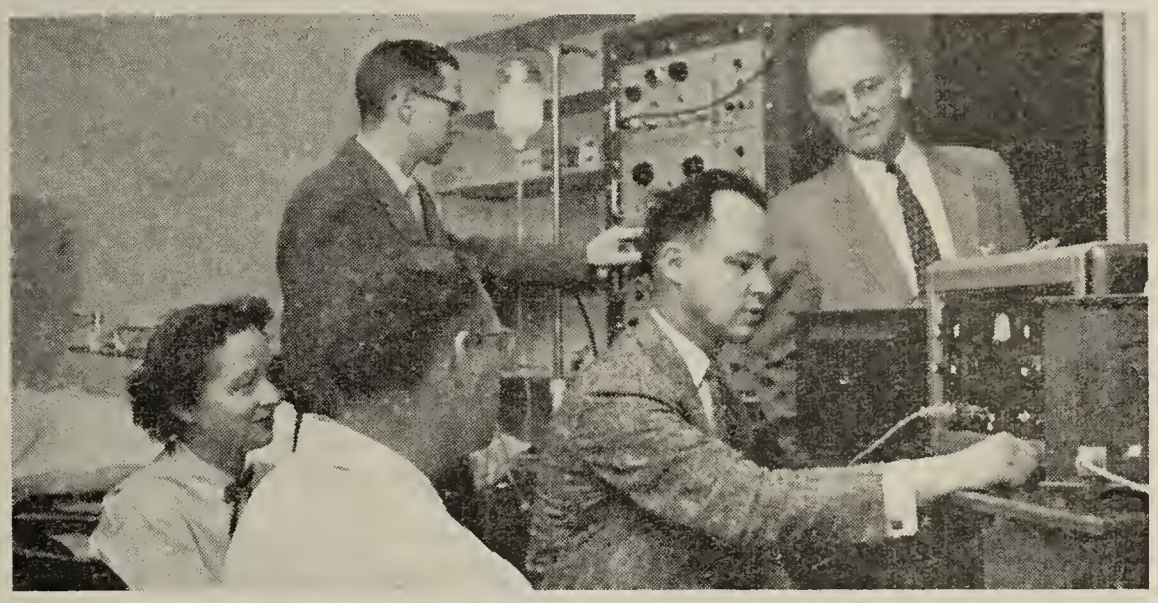
Dr. Betty Gilson, in charge of the Center states that as of July 1, 1957, nine cases have been seen at the Center, two of them private patients and the others are children receiving care under the State Board of Health's Crippled Children's program. Twenty-three patients, three of them private cases, are scheduled for this summer. Also, the fall schedule for the Center is being filled now.

Center Established

The Center, established by the State Board of Health at its June 30, 1956 meeting, is an extension of the Board's Rheumatic Fever Diagnostic Center established in 1949. During the past year equipment has been purchased and installed in the Deaconess Hospital in Great Falls. An agreement with the hospital also made this equipment available for patients on a private basis through private physicians. A private patient is a person under 21 years of age not eligible under the Board's Crippled Children's program or an older person not eligible under any public program.

Purpose

The purpose of the Center is to serve all Montana physicians on a diagnostic and consultive basis. It grew out of the needs of rheumatic and congenital heart disease patients under the care of private physicians in addition to those eligible for care under the Board's Crippled Children's program. Its establishment permits the handling of the most difficult diagnostic-cardiac problems, (especially as they relate to heart surgery) within the state. Before the establishment of the Center these patients of necessity were sent as far away as Denver, Salt Lake City, Seattle or Minneapolis for diagnosis.



HEART DIAGNOSTIC CENTER EQUIPMENT: Dr. Betty Gilson, Administrator of the Center (seated left) and Edward C. Lustgraaf (seated right) laboratory technician, watch as Dr. Donald C. Overy (standing left) checks the catheterization machine, and Dr. John A. Curtis (seated center) operates the oximeter in a demonstration of the equipment used at the Center. Dr. Thomas F. Walker (standing right) is a member of the Montana Medical Association's heart committee cooperating in the development of the Center

(Photo by GREAT FALLS TRIBUNE)

This was very costly in time and money. Most of these patients needing heart surgery obtained it in these out-of-state cities although for some years several Montana physicians especially trained in heart surgery have been available for certain surgical operations. However, only recently have there come to Montana physicians who were especially trained in the difficult diagnostic procedures so necessary in diagnosing those conditions that might benefit from modern heart surgical methods.

The Montana Medical Association approved the Center. It assisted in the development of the Center through a subcommittee of its rheumatic fever and heart committee. This subcommittee has helped in the coordination and arrangements needed for these special procedures.

All patients must be referred to the Center by a physician in Montana. Patients are then seen by Dr. Gilson at the Board's Rheumatic Fever and Heart Diagnostic Clinic which is housed in the city-county health department in Great Falls. Routine studies are made

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Heart Conditions Top Causes of Death in '56 Provisional Figures Show

Provisional figures announced last month by the State Board of Health office of vital statistics show heart conditions as the leading cause of death in Montana in 1956.

Last year 6,460 deaths were recorded in Montana to give the state a death rate of 9.6 per 1,000 population. This compares with 6,115 deaths in 1955 and a rate of 9.3 per 1,000 population.

Heart conditions accounted for 2,170 (33.6%) of the deaths recorded last year. Cancer was the second leading cause of death with 911 deaths (14.1%) attributed to cancer.

Other causes of death in 1956 were: third, vascular lesions, 718 deaths (11%); fourth, accidents, 609 deaths; fifth, early infancy and congenital malformation, 369 deaths; sixth, pneumonia and influenza, 207 deaths; seventh, diabetes, 100 deaths; eighth, suicides, 97 deaths; ninth, nephritis, 85 deaths; tenth, cirrhosis of the liver, with 63 deaths

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Montana Public Health Nurses Awarded Education Stipends

The State Board of Health is providing training for seven local public health nurses.

They are attending the University of Minnesota during the summer.

Miss Wava L. Dixon, director of the Board's division of Public Health Nursing, stated the purpose of the training program for public health nurses is "to improve the public health nursing program, by maintaining educational standards. This opportunity is particularly important to Montana since the state has no school of public health."

The training program, although carried on with limited funds, has been very successful. Since 1950, public health nurses given this opportunity have more than fulfilled their training obligation. Most of these nurses in this program are still employed. Only rarely has a nurse been lost from public health nursing services who began her training program.

The nurses and place of employment, are:

Mrs. Bernice McKain, Mrs. Lucille Ille, both of Great Falls (Cascade County), Mrs. Betty Higgins, Choteau (Teton County), Mrs. Emma Wright and Mrs. Sylvia McFarlane, both of Havre (Hill County), Mrs. Betty Holliday, Roundup (Musselshell County) and Mrs. Margaret Stenslie, Wolf Point (Roosevelt County).

Heart Diagnostic Center

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there which include a careful history, physical examination, electrocardiogram, complete laboratory blood work, fluoroscopic examination and nurse interviewing.

From the Clinic the patients are taken to the Heart Center at the hospital where they are studied by a team of medical specialists—the heart diagnostic team consisting of Drs. Donald C. Overy, John A. Curtis, Paul F. Christianson and Betty Gilson. Assisting the physicians are Ed Lustgraaf, laboratory technician, and Edith Qualls and Delores Chesner, registered nurses.

Private patients referred to the Heart Center by their physicians must pay their own cost of service or have it paid by a public agency other than the State Board of Health. Patients under 21 years of age eligible for the Crippled Children's program are paid for by the State Board of Health. The cost covers the hospitalization and private physicians services while the patient is in the hospital.

The procedures being conducted at the Hospital Center consist of: (1) **cardiac catheterization,** and (2) **angiocardiography.**

Cardiac catheterization gives the physicians three types of information: defects in the heart structure, degree of pressures in heart chambers, and the oxygen content of the blood in each chamber of the heart. It is done by inserting a long tube through a small incision in the patient's arm or leg vein into the heart along the avenue coursed by the blood returning to the heart. The small diameter tube relays vital information from the various parts of the heart through sensitive catheter tips. It is done without pain to the patient who requires only a slight sedative.

Angiocardiography makes it possible to detect, by x-ray procedures, faulty operation of heart valves; widening, narrowing or any deviation of the system. To do this an opaque material or dye is injected into the vein of the patient and x-ray pictures are taken in rapid sequence. This films the course of the material at it passes through the various chambers of the heart.

These procedures make it usually possible for the physicians to determine the exact type of defect in the patient's heart, and thus if so indicated the corrective surgery that can be recommended. Heart surgery is not done at the Center or by any of the diagnostic team. The patient and his own physician determine how, when and where to follow the recommendation as in any other type of consultation service.

Dr. Carl W. Hammer Named MPHA President

Dr. Carl W. Hammer, Bozeman, was elected president of the Montana Public Health Association at the May convention in Havre. Dr. Hammer is Bozeman's city-county health officer.

Mrs. Harriet Patterson, Thompson Falls, was named vice president.

Dr. David Duncan, Polson, Dr. B. C. Farrand, Jordan, and Mrs. Margaret Stenslie, Wolf Point, were elected to the MPHA executive committee.

Vernon Sloulin, Helena, will continue to serve as treasurer and Mrs. Emma Wright, Havre, as secretary. They were elected to two-year terms at the 1956 meeting.

The MPHA's 40th annual meeting, in 1958, will be in Great Falls.

Records and Statistics Division Established

A division to be known as the Division of Records and Statistics was approved by the State Board of Health at its July meeting.

This division was established to coordinate the functions formerly carried out by the state registrar and the public health statistician. These functions were formerly performed as units of the administrative section of the State Board of Health. The position of State Registrar was held by Lucien Benepe before his retirement last month. John Wilson has been the Public Health Statistician, and he has served as acting State Registrar since Benepe's retirement.

Wilson has been named the Director of this division and will also be the State Registrar. Montana law does not now require a "Bureau of Vital Statistics" as it did formerly, but it does require that the Board designate a State Registrar. Montana law also permits the Board to change its internal organizational structure.

Since December 1954 Wilson has held the public health statistician position. He came here from Pierre, South Dakota where for four years he was assistant director of public health statistics and assistant state registrar in the State Health Department.

He received his B. S. Degree in economics and mathematics from the South Dakota State College and an M.S. Degree in biostatistics and public health from the University of Minnesota.

The work formerly done in both units will be continued and as time permits some aspects will be improved and intensified.

The position of public health statistician has been eliminated and some reorganization of clerical staff responsibilities will be made. The division will function within the limits of the present budget.

Coming Events . . . .

Aug. 11-14—International Northern Great Plains Conference on Special Education, and Rehabilitation, Billings.

Sept. 16—Narcotic and Alcoholism Advisory Committee, Helena.

Sept. 18-21—Montana Medical Association, Missoula.

Sept. 23-24—Montana Society for Mental Health, Warm Springs.

Oct. 5-8—Montana State Nurses Association, Butte.

Food Service Training Offered Personnel

A series of food service training courses were held during June in Flathead and Glacier Counties. These sessions were planned and carried out to help restaurant operators in this part of the state provide safer food service to the citizens and to the large tourist population which visits the area each year.

During the preliminary conference of restaurant operators to plan for these training sessions the following conclusions were reached.

—Proper food handling is not only necessary from a health stand point, but it is also good business practice.

—The public is more alert to insanitary food-handling today. The number of persons who eat out is growing and they have the modern concept that patrons are entitled to safe, clean food.

—Food is probably the most common vehicle in the spread of certain diseases.

—To protect the public's health, preventive measures should be instituted before, rather than after an outbreak of food poisoning.

—An effective restaurant sanitation program should eliminate all avenues of disease transmission in preparing food and drink.

Training Sessions Held

With these principles in mind, two types of sessions were planned (1) a six-hour training session for operators and supervisory personnel; (2) a two-hour session for all food service employees. About 59 restaurant operators and supervisors attended the two six-hour sessions, and a total of 104 other employees attended the two-hour sessions. To accomodate all these people, 12 of the two-hour sessions were held.

Items Discussed

The major items discussed at these meetings included:

—Duties and responsibilities of food service employees.

—Ways of preventing the spread of food-borne disease.

—Improved customer service.

—Personal hygiene of the employees.

Films, filmstrips, demonstrations, discussions and flip charts were used to present the material for the groups' consideration.

THE PROPER CLEANING OF GLASSES is demonstrated by George Fielding, Flathead County Sanitarian. This was a part of the food service training session for food service employees held in Flathead County in June.

Personnel Assisting

The sessions in Flathead County were arranged by the county health officer, Dr. Alfred Wallner and the Sanitarian, George Fielding, both of Kalispell. Dr. Edward L. King, Browning, county health officer for Glacier County arranged the sessions in that county. State Board of Health personnel assisted with the planning and presentations in both counties. State Board of Health personnel assisting with these sessions included: Vernon Sloulin, Kenneth Read, William Wollschlager, sanitarians; and Cornelia Robinson and Mary Carmack, health educators.

Concurrently the U. S. Public Health Service, at the request of the National Park Service, conducted three similar training courses for Glacier Park Company food personnel.

Alcohol, Alcoholics, Alcoholism Topic of New Education Film

A new film, "To Your Health," has been added to the State Board of Health's film library. The film teaches about alcohol, alcoholics and alcoholism.

The 10-minute, color and sound presentation employs animated characters, simple narration and music.

It is a factual film, stressing the importance of scientific information about: (1) the effect of alcoholic beverages on the human body; (2) drunkenness; and (3) why people drink alcoholic beverages.

This film is available for loan, without charge. Requests should be directed to: State Board of Health, Div. of Health Education, Helena, Montana.

Chest X-Ray Unit Loaned to Public Health District I

One of the Chest X-Ray Survey Mobile units has recently been loaned by the State Board of Health to Public Health District I (Big Horn-Rosebud Counties). It will be used for the year as a part of the case-finding program in the district in an attempt to find early suspect tuberculosis. Other chest disorders such as suspect cancer and certain heart conditions detected through the program will be included in the program for referral to physicians.

These counties form one of the high tuberculosis incidence areas of the state. The physician diagnosed tuberculosis rates following referrals of the intensified chest x-ray survey program (completed in the Fall of 1954) in Big Horn County was 435.9 per 100,000 population, Rosebud County 554.5 while the state rate was 240.4. These high rates reflect the findings of other counties with large Indian populations. Both the Crow and Cheyenne Reservations are within this public health district.

Dr. Maude Gerdes, District Health Officer, and other health department staff are now developing a plan in their disease control program for the maximum utilization of this unit. The staff now employed in the district will carry out the x-ray program without the employment of additional staff. The Division of Indian Health of the U. S. Public Health Service is cooperating in the program through the Billings area office.

It is anticipated the unit will be rotated between Hardin, Forsyth and Lame Deer.

Medical Students Come to Montana For Rural Experience

Again this summer a senior medical student is broadening his medical experience by working with a Montana physician in rural Eastern Montana.

This is the sixth such student that Dr. B. C. Farrand, Jordan, Montana, has invited to work in his rural, general medical practice during the student's senior year vacation.

"I gain a lot from working with these students," Dr. Farrand has said. "They are stimulating and challenging. I think they keep me doing my work better.

"Frequently I've mentioned to Mrs. Farrand that these young people know more when they come here to work than I did when I finished school."

Dr. Farrand was graduated from State University of Iowa College of Medicine in 1923. He has been in the general practice of medicine in Jordan, the county seat of Garfield County since 1925.

Since there are no other physicians in the county, Dr. Farrand's practice covers an area (4,837 square miles) greater than the state of Delaware (2,057 square miles). The 1950 census places the population of the county at 2,172; the population of Jordan is 800.

These summer work experiences are arranged by Dr. Farrand with individual students that contact him. While many medical schools make arrangements for such experience for their students, the individual medical schools have no part in the arrangements and program that the students work out with Dr. Farrand for their senior year vacation.

The first four summers that students worked with Dr. Farrand, they came from Colorado. The fifth student was from St. Louis. This summer's medical student is from Kansas.

Students contact Dr. Farrand after hearing of the profitable experience from one of the other medical students that have worked through their summer vacation with Dr. Farrand. All of the students have come to work with Dr. Farrand because they value the experience, not because it is required of their particular school.

The student receives a nominal sum and transportation to Jordan. They live in the hospital and take their meals there. At the hospital the students see the out patients, do the laboratory work and assist with other work.

The only hospital in Garfield county is the modern, 22-bed general hospital at Jordan. It is the only hospital for over 50 miles any direction.

The students usually work at the hospital in the mornings and come to Dr. Farrand's office in the afternoons. They follow through with Dr. Farrand on the maternity cases and assist with deliveries.

The students go with Dr. Farrand on house calls, take medical histories and do examination in the office. "We discuss each patient's problems and review the history and plan the course of treatment. Among other things, the history and medical records are much improved and are more thorough than I might do were I not working with the student," Dr. Farrand stated.

State Board of Health Provides Health Education Field Training

Miss Leonie J. Martin of Tasmania spent a three week period in July with the Montana State Board of Health. This was a part of her field training experience and observation in public health education which is required of candidates for a Master of Public Health Degree. Miss Martin completed her academic training for this degree during the past school year in the University of California School of Public Health at Berkeley.

She is on educational leave from the State Department of Health Services in the Island of Tasmania, one of the six states of Australia. She has been working as the Senior Psychologist in the Division of Mental Health.

Miss Martin received her undergraduate training at the University of Sydney.

Prior to her arrival in Helena she spent some time in Portland and Tacoma. She will receive training in Window Rock, Arizona; Knoxville, Tennessee; Washington, New York City and London, England.

Miss Martin is the seventh university student in health education coming to the Montana State Board of Health since the summer of 1952. Six of these students have been from the California School of Public Health and one from the Minnesota School of Public Health. Their homes have been in Little Rock, Arkansas; Boise, Idaho; Amman, Jordan; Manila, Philippine Islands; Port Moresby, New Guinea; and Santiago, Chile.

PUBLIC HEALTH NURSING ORIENTATION

Orientation for public health nursing was provided in June for five nurses who have been newly employed in local public health nursing positions during the last year.

A four day session was conducted for them by Frances Davidson and Gladys Schuerman, State Board of Health Public Health Nursing Consultants. Assistance was also given by the entire public health nursing division and other State Board of Health personnel.

The program was held in the State Laboratory Building in Helena.

Miss Wava L. Dixon, Director of Public Health Nursing, stated that, "this orientation program. which is conducted annually, is for the purpose of assisting new public health nurses to better serve their communities."

This program gives these nurses an over-all-view of public health nursing in Montana; an understanding of their relationships to their employers, to other professional health workers, to the State Board of Health and other allied agencies.

It gives them assistance in improving their public health nursing activities and skills. in program planning, and in the procedures used in utilizing community and state resources.

It is aimed to supplement the in-service training which is given on a continuing basis by the Public Health Nursing Division through individual and small group on-the-job conferences.

The nurses who participated in the program were: Mrs. Evelyn Self, Shelby, (Toole County); Mrs. Ruth Bailey, Laurel, (Yellowstone County); Mrs. Monica Johnson, Superior, (Mineral County); Andre Peterson, Forsyth, District I (Big Horn-Rosebud Counties); Dorothy Fassler, Polson, District II (Lake-Sanders Counties).

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Sister Gabrilla
St. Vincent's Unit
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